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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37C.F.R. §1.53(b))

Attorney Docket No. PC10782A

First Named Inventor or Application Identifier S. McLean

Title USE OF DELTA OPIOID RECEPTOR LIGANDS AND SEROTONIN REUPTAKE INHIBITORS IN THE TREATMENT OF CHEMICAL DEPENDENCIES

Express Mail Label No. EL446402275US

07/09/01
09/901352

APPLICATION ELEMENTS		ADDRESS TO:		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
See MPEP chapter 600 concerning utility patent application contents.				
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)			
2. <input checked="" type="checkbox"/> Specification [Total Pages 19]	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
[preferred arrangement set forth below]		a. <input type="checkbox"/> Computer Readable Copy		
- Descriptive title of the Invention		b. <input type="checkbox"/> Paper Copy (identical to computer copy)		
- Cross References to Related Applications		c. <input type="checkbox"/> Statement verifying identity of above copies		
- Statement Regarding Fed sponsored R&D				
- Reference in Microfiche Appendix				
- Background of the Invention				
- Brief Summary of the Invention				
- Brief Description of the Drawings (if filed)				
- Detailed Description				
- Claim(s)				
- Abstract of the Disclosure				
3. <input type="checkbox"/> Drawing(s) (35 U.S.C. 11.3)[Total sheets]	8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
4. <input checked="" type="checkbox"/> Oath or Declaration [Total pages 3]	9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)			
a. <input type="checkbox"/> Newly executed (original or copy)				
b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]				
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).				
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)	10. <input type="checkbox"/> English Translation Document (if applicable)			
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.				
11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations				
12. <input checked="" type="checkbox"/> Preliminary Amendment				
13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
14. <input type="checkbox"/> *Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, (PTO/SB/09-12) Status still proper and desired				
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)				
16. <input checked="" type="checkbox"/> Other: Priority Claim 60/217,548 July 12, 2000				
<i>*NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</i>				
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: /				
Prior application information: Examiner _____ Group/Art Unit: _____				

18. CORRESPONDENCE ADDRESS

(Insert Customer No. or Attach bar code label here)

or Correspondence address below

Name	Paul H. Ginsburg				
Address	Pfizer Inc				
Address	235 East 42nd Street, 20th Floor				
City	New York	State	New York	Zip Code	10017-5755
Country	United States Of America	Telephone	(212)573-2369	Fax	(212)573-1939

NAME (Print/type)	Seth H. Jacobs	Registration No. (Attorney/Agent)	32,140
Signature	<i>Seth H. Jacobs</i>	Date	7/19/01

FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.
These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

Total Amount of Payment (\$ 710.00)

Application Number	Unassigned
Filing Date	Concurrent herewith
First Named Inventor	S. McLean
Examiner Name	Unassigned
Group/Art Unit	Unassigned
Attorney Docket No.	PC10782A

METHOD OF PAYMENT (check one)

1. The commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-1445

Deposit Account Name Pfizer Inc

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17. Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance.

2. Payment Enclosed:

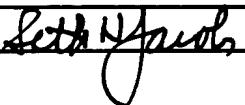
Check Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES		FEE DESCRIPTION				Fee Description	Fee Paid
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge – late fee or oath			
127	50	227	25	Surcharge—late provisional filing fee or cover sheet			
139	130	139	130	Non-English specification			
147	2,520	147	2,520	For filing a request for reexamination			
112	920*	112	920*	Requesting publication of SIR prior to Examiner action			
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action			
115	110	215	55	Extension for reply within first month			
116	390	216	195	Extension for reply within second month			
117	890	217	445	Extension for reply within third month			
118	1,390	218	695	Extension for reply within fourth month			
128	1,890	228	945	Extension for reply within fifth month			
119	310	219	155	Notice of Appeal			
120	310	220	155	Filing a brief in support of an appeal			
121	270	221	135	Request for oral hearing			
138	1,510	138	1,510	Petition to institute a public use proceeding			
140	110	240	55	Petition to revive - unavoidable			
141	1,240	241	620	Petition to revive - unintentional			
142	1,240	242	620	Utility issue fee (or reissue)			
143	440	243	220	Design issue fee			
144	600	244	300	Plant issue fee			
122	130	122	130	Petitions to the Commissioner			
123	50	123	50	Petitions related to provisional applications			
126	240	126	240	Submission of Information Disclosure Statement			
581	40	581	40	Recording each patent assignment per property (times number of properties)			
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))			
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))			
Other Fee (specify)							
Other Fee (specify)							

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY				Complete (if Applicable)
Type or Printed Name	Seth H. Jacobs		Reg. Number	32,140
Signature		Date 9/9/01	Deposit Account User ID	

CERTIFICATE OF MAILING EXPRESS MAIL

PFIZER DOCKET NO: PC10782A/SHJ

APPLICATION NUMBER: NOT YET ASSIGNED

TITLE: USE OF DELTA OPIOID RECEPTOR LIGANDS AND SEROTONIN REUPTAKE INHIBITORS IN THE TREATMENT OF CHEMICAL DEPENDENCIES

APPLICANT: S. McLean et al

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Date of Deposit July 9, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.



Michelle D. Dungee

(Signature of person mailing paper or fee)

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